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	Request
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Request	Application Number	09/658,734-Conf. #9039
For nued Examination (RCE)	Filing Date September 11, 2000	
Transmittal	First Named Inventor	Winfried EDELMANN
	Art Unit	1651
or Patents 22313-1450	Examiner Name	R. A. Davis
22313-1450	Attorney Docket Number	AHN-001DV1RCE2

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

amendments encl	uired under 37 CFR 1.114 Note: If the RCE is proper, any osed with the RCE will be entered in the order in which they were wish to have any previously filed unentered amendment(s) entered	re filed unless applica	int instructs otherwise. If			
a. x Previous may be	a. X Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.					
i. Con	sider the arguments in the Appeal Brief or Reply Brief pre	eviously filed on				
ii. X Oth	er Response to Final Office Action filed 3/30/0	5				
b. x Enclose	d					
i. X Ame	endment/Reply (copy) iii. Information D	Disclosure Stateme	nt (IDS)			
x	x Exter	Transmittal (1 page) nsion of Time (1 page) endices A-D				
ii Affic	davit(s)/Declaration(s) (copy) iv. Other Retu	rn post card				
2. Miscellaneous						
a. Suspens	 sion of action on the above-identified application is reque 	ested under 37 CF	R 1.103(c) for a			
period o	f months. (Period of suspension shall not exc	eed 3 months; Fee u	nder 37 CFR 1.17(i) required)			
b. Other		,				
	E fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 w	hen the RCE is filed				
	ector is hereby authorized to charge the following fees, a ments to Deposit Account No. 12-0080					
=						
iii. Other						
b. Check in the amount of \$ enclosed						
c. Paymer	t by credit card (Form PTO-2038 enclosed)					
	SIGNATURE OF APPLICANT, ATTORNEY, OR	AGENT REQUIR	ED			
Signature	Lawringe	Date May 27	, 2005			
Name (Print/Type) Maria Laccotripe Zacharakis, Ph.D., J.D. Registration No. 56,266		56,266				

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 553862275 US, in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box, 1450, Alexandria, VA 22313-1450, on the date shown

Dated: May 27, 2005

Signature:

(Maria Laccotripe Zacharakis, Ph.D., J.D.)

PTO/SB/17 (12-04v2)
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Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Digder the Pape TRADEN Complete if Known Effective on 12/08/2004. 09/658,734-Conf. #9039 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** September 11, 2000 FEE TRANSMITTAL Filing Date Winfried EDELMANN First Named Inventor For FY 2005 **Examiner Name** R. A. Davis Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1651 AHN-001DV1RCE2 TOTAL AMOUNT OF PAYMENT 1.690.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP Deposit Account For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments х **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES** Small Entity Small Entity **Small Entity Application Type** Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 200 100 Utility 300 150 500 250 Design 200 100 100 50 130 65 200 100 300 150 160 80 Plant 500 250 600 300 300 150 Reissue 200 100 **Provisional Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 Multiple Dependent Claims Fee Paid (\$) **Total Claims Extra Claims** Fee (\$) Fee Paid (\$) Fee Paid (\$) **Extra Claims** Indep. Claims Fee (\$) 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) **Total Sheets** (round up to a whole number) x - 100 = /50 Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1253 Extension for resp. within third month (less \$120 prev. pd.) 900.00 1801 Request for continued examination (RCE) (see 37 790.00 SUBMITTED BY Registration No. 56,266 (617) 227-7400 Signature Telephone Maria Laccotripe Zacharakis, Ph.D., J.D. Name (Print/Type) Date May 27, 2005

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Dated: May 27, 2005

Signature: World Laco

(Maria Laccollip Zacharakis, Ph.D., J.D.)